

## Rangel, Dingell Introduce H.R. 6331, The Medicare Improvements for Patients and Providers Act of 2008

WASHINGTON- House Ways and Means Committee Chair Charles B. Rangel (D-NY) and House Energy and Commerce Committee Chair John Dingell (D-MI) today introduced a House companion to S. 3101—a bill sponsored by Senate Finance Chairman Max Baucus (D-MT), the Medicare Improvements to the Patients and Providers Act of 2008 (H.R. 6331).

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WASHINGTON-  
House Ways and Means Committee Chair Charles B. Rangel (D-NY) and House Energy and Commerce Committee Chair John Dingell (D-MI) today introduced a House companion to S. 3101—a bill sponsored by Senate Finance Chairman Max Baucus (D-MT), the Medicare Improvements to the Patients and Providers Act of 2008 (H.R. 6331).

The  
bill contains the bulk of S. 3101, and makes further improvements including a delay of 18 months for the competitive bidding program for Durable Medical Equipment (DMEPOS). Like the Baucus bill, it prevents a 10.6 percent pay cut to physicians that is scheduled to take place on July 1, and provides a 1.1 percent update starting January 1, 2009. The bill also includes important beneficiary improvements such as Medicare mental health parity, improved preventive coverage, and enhanced assistance for low-income beneficiaries.

&ldquo;While

this bill is far less than what the House passed in the CHAMP Act, it is a reasonable compromise,&rdquo; said Chairman Rangel. &ldquo;We owe it to beneficiaries and providers to make these modest improvements to the program now. I urge my Senate colleagues to work with us to enact this Medicare bill into law next week.&rdquo;

&ldquo;While

more needs to be done, this bill protects our seniors and supports the physicians who care for them and does so in a responsible way,&rdquo; said Chairman Dingell. &ldquo;I urge all my colleagues to do the right thing and not allow these cuts to occur.&rdquo;

H.R. 6331 includes the following provisions of S. 3101:

- Prevents the 10.6 percent pay cut to physicians scheduled to take effect July 1, with rates holding steady for the rest of 2008, and a 1.1 percent update for 2009;
- Improves and extends payments to rural providers;
- Provides  
beneficiary investments of \$4 billion over 5 years and \$16.6 billion over ten years. These investments include increasing asset levels to help more beneficiaries qualify for premium assistance, Medicare mental health parity, and increased coverage for preventive services;
- Includes  
additional provisions for pharmacies, dialysis patients and providers, community health centers, ambulances, rural providers, e-prescribing, psychologists, social workers and others;
- Incorporates  
balanced offsets between Medicare Advantage IME cuts and Private-Fee-for-Service changes that impact network requirements, not payment levels.

In addition, H.R. 6331 would include an 18-month delay in the DMEPOS competitive bidding process, integrating provisions from the Stark-Camp-Rangel-Dingell-Pallone-Boehner bill introduced last week (H.R. 6252). This delay will give the Center for Medicare and Medicaid Services (CMS) the opportunity to make needed improvements to the program. These improvements are designed to improve the program for both beneficiaries and suppliers. H.R. 6331 also eliminates cuts to oxygen and wheelchair payments contained in S. 3101.

The bill is scheduled to be voted on under suspension of the rules on Tuesday, June 24.

[[Read H.R. 6331 \(pdf\)](#)]

Prepared by the Committee on Energy and Commerce

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